

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

761194Orig1s000

Trade Name: Nexviazyme

Generic or Proper Name: avalglucosidase alfa-ngpt

Sponsor: Genzyme Corporation

Approval Date: June 6, 2021

Indication: For the treatment of patients 1 year of age and older with late-onset Pompe disease (lysosomal acid alpha-glucosidase [GAA] deficiency).

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**CENTER FOR DRUG EVALUATION AND
RESEARCH**

APPLICATION NUMBER:

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APPROVAL LETTER

BLA 761194

BLA APPROVAL

Genzyme Corporation
Attention: Jeremy Dabbeek, PhD
Senior Manager, Global Regulatory Affairs
55 Corporate Drive
Bridgewater, NJ 08807

Dear Dr. Dabbeek:

Please refer to your biologics license application (BLA) dated and received September 18, 2020, and your amendments, submitted under section 351(a) of the Public Health Service Act for Nexviazyme (avalglucosidase alfa-ngpt) injection.

We acknowledge receipt of your major amendment dated March 25, 2021, which extended the goal date by three months.

LICENSING

We have approved your BLA for Nexviazyme (avalglucosidase alfa-ngpt) effective this date. You are hereby authorized to introduce or deliver for introduction into interstate commerce, Nexviazyme under your existing Department of Health and Human Services U.S. License No. 1596. Nexviazyme is indicated for the treatment of patients 1 year of age and older with late-onset Pompe disease (lysosomal acid alpha-glucosidase [GAA] deficiency).

MANUFACTURING LOCATIONS

Under this license, you are approved to manufacture avalglucosidase alfa-ngpt drug substance at Genzyme Flanders bvba in Geel, Belgium. The final formulated drug product will be manufactured, filled, labeled, and packaged at Genzyme Ireland Limited, Waterford, Ireland; secondary packaged and labeled at Genzyme Corporation, Northborough, MA. You may label your product with the proprietary name, Nexviazyme, and market it in 100mg/vial powder for injection.

DATING PERIOD

The dating period for Nexviazyme (avalglucosidase alfa-ngpt) shall be 48 months from the date of manufacture when stored at 5 ± 3 °C. The date of manufacture shall be defined as the date of final sterile filtration of the formulated drug product. The dating period for your drug substance shall be (b) (4) months from the date of manufacture when stored at (b) (4) °C.

FDA LOT RELEASE

You are not currently required to submit samples of future lots of Nexviazyme to the Center for Drug Evaluation and Research (CDER) for release by the Director, CDER, under 21 CFR 610.2. We will continue to monitor compliance with 21 CFR 610.1, requiring completion of tests for conformity with standards applicable to each product prior to release of each lot.

Any changes in the manufacturing, testing, packaging, or labeling of Nexviazyme, or in the manufacturing facilities, will require the submission of information to your biologics license application for our review and written approval, consistent with 21 CFR 601.12.

APPROVAL & LABELING

We have completed our review of this application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit, via the FDA automated drug registration and listing system (eLIST), the content of labeling [21 CFR 601.14(b)] in structured product labeling (SPL) format.¹ Content of labeling must be identical to the enclosed labeling (Prescribing Information). Information on submitting SPL files using eLIST may be found in the guidance for industry *SPL Standard for Content of Labeling Technical Qs and As* (October 2009).²

The SPL will be accessible via publicly available labeling repositories.

CARTON AND CONTAINER LABELING

Submit final printed carton and container labeling that are identical to the enclosed carton and container labeling and carton and container labeling submitted on May 21, 2021, as soon as they are available, but no more than 30 days after they are printed. Please submit these labeling electronically according to the guidance for industry *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications*. For administrative purposes, designate this submission “**Final Printed Carton and Container Labeling for approved BLA 761194.**” Approval of this submission by FDA is not required before the labeling is used.

¹ See <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

² We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database at <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

ADVISORY COMMITTEE

Your application for Nexviazyme was not referred to an FDA advisory committee because the application did not raise significant public health questions on the role of the biologic in the diagnosis, cure, mitigation, treatment, or prevention of a disease.

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients (which includes new salts and new fixed combinations), new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because this drug product for this indication has an orphan drug designation, you are exempt from this requirement.

POSTMARKETING REQUIREMENTS UNDER 505(o)

Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act (FDCA) authorizes FDA to require holders of approved drug and biological product applications to conduct postmarketing studies and clinical trials for certain purposes, if FDA makes certain findings required by the statute.

We have determined that an analysis of spontaneous postmarketing adverse events reported under subsection 505(k)(1) of the FDCA will not be sufficient to identify unexpected serious risks of pregnancy and maternal complications, adverse effects on the developing fetus and neonate, and adverse effects on the infant in females of child-bearing potential who are prescribed Nexviazyme (avalglucosidase alfa-ngpt) during pregnancy and/or lactation.

Furthermore, the active postmarket risk identification and analysis system as available under section 505(k)(3) of the FDCA will not be sufficient to assess these serious risks.

Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following study:

- 4026-1 Conduct a worldwide, descriptive safety study that collects data in women and their offspring who are exposed to Nexviazyme (avalglucosidase alfa-ngpt) during pregnancy and/or lactation to assess risk of pregnancy and maternal complications, adverse effects on the developing fetus and neonate, and adverse effects on the infant. Outcomes of exposed infants,

including growth and development, will be assessed through at least the first year of life. The study will collect information for 10 years.

The timetable you submitted on July 29, 2021, states that you will conduct this study according to the following schedule:

| | |
|----------------------------|---------|
| Draft Protocol Submission: | 02/2022 |
| Final Protocol Submission: | 10/2022 |
| Study Completion: | 10/2032 |
| Final Report Submission: | 04/2033 |

FDA considers the term *final* to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.³

Submit clinical protocols to your IND 109569 with a cross-reference letter to this BLA. Submit nonclinical and chemistry, manufacturing, and controls protocols and all final reports to your BLA. Prominently identify the submission with the following wording in bold capital letters at the top of the first page of the submission, as appropriate:

Required Postmarketing Protocol Under 505(o), Required Postmarketing Final Report Under 505(o), Required Postmarketing Correspondence Under 505(o).

Submission of the protocol for required postmarketing observational studies to your IND is for purposes of administrative tracking only. These studies do not constitute clinical investigations pursuant to 21CFR 312.3(b) and therefore are not subject to the IND requirements under 21 CFR part 312 or FDA's regulations under 21 CFR parts 50 (Protection of Human Subjects) and 56 (Institutional Review Boards).

Section 505(o)(3)(E)(ii) of the FDCA requires you to report periodically on the status of any study or clinical trial required under this section. This section also requires you to periodically report to FDA on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Section 506B of the FDCA, as well as 21 CFR 601.70 requires you to report annually on the status of any postmarketing commitments or required studies or clinical trials.

FDA will consider the submission of your annual report under section 506B and 21 CFR 601.70 to satisfy the periodic reporting requirement under section 505(o)(3)(E)(ii) provided that you include the elements listed in 505(o) and 21 CFR 601.70. We remind you that to comply with 505(o), your annual report must also include a report on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Failure to submit an annual report for studies or clinical trials required under 505(o) on

³ See the guidance for Industry *Postmarketing Studies and Clinical Trials—Implementation of Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act* (October 2019).
<https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

the date required will be considered a violation of FDCA section 505(o)(3)(E)(ii) and could result in enforcement action.

POSTMARKETING COMMITMENTS NOT SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We also remind you of your postmarketing commitment:

4026-2 Provide bioburden test method qualification reports for drug substance in-process samples using two additional batches.

The timetable you submitted on July 15, 2021, states that you will conduct this study according to the following schedule:

Final Report Submission: 08/2021

4026-3 Provide M6P content specification for drug substance and drug product.

The timetable you submitted on July 15, 2021, states that you will conduct this study according to the following schedule:

Final Report Submission: 06/2022

Submit clinical protocols to your IND 109569 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this BLA. In addition, under 21 CFR 601.70 you should include a status summary of each commitment in your annual progress report of postmarketing studies to this BLA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled “**Postmarketing Commitment Protocol**,” “**Postmarketing Commitment Final Report**,” or “**Postmarketing Commitment Correspondence**.”

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. For information about submitting promotional materials, see the final guidance for industry *Providing Regulatory Submissions in Electronic and Non-Electronic Format-Promotional Labeling and Advertising Materials for Human Prescription Drugs*.⁴

⁴ For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/media/128163/download>.

You must submit final promotional materials and Prescribing Information, accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.81(b)(3)(i)]. Form FDA 2253 is available at FDA.gov.⁵ Information and Instructions for completing the form can be found at FDA.gov.⁶

REPORTING REQUIREMENTS

You must submit adverse experience reports under the adverse experience reporting requirements for licensed biological products (21 CFR 600.80).

Prominently identify all adverse experience reports as described in 21 CFR 600.80.

You must submit distribution reports under the distribution reporting requirements for licensed biological products (21 CFR 600.81).

You must submit reports of biological product deviations under 21 CFR 600.14. You should promptly identify and investigate all manufacturing deviations, including those associated with processing, testing, packing, labeling, storage, holding and distribution. If the deviation involves a distributed product, may affect the safety, purity, or potency of the product, and meets the other criteria in the regulation, you must submit a report on Form FDA 3486 to:

Food and Drug Administration
Center for Drug Evaluation and Research
Division of Compliance Risk Management and Surveillance
5901-B Ammendale Road
Beltsville, MD 20705-1266

Biological product deviations, sent by courier or overnight mail, should be addressed to:

Food and Drug Administration
Center for Drug Evaluation and Research
Division of Compliance Risk Management and Surveillance
10903 New Hampshire Avenue, Bldg. 51, Room 4207
Silver Spring, MD 20903

POST APPROVAL FEEDBACK MEETING

New molecular entities and new biological products qualify for a post approval feedback meeting. Such meetings are used to discuss the quality of the application and to evaluate the communication process during drug development and marketing application review. The purpose is to learn from successful aspects of the review

⁵ <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>

⁶ <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>

process and to identify areas that could benefit from improvement. If you would like to have such a meeting with us, call the Regulatory Project Manager for this application.

If you have any questions, call Jenny Doan, Regulatory Project Manager, at (301) 796-1023.

Sincerely,

{See appended electronic signature page}

Janet W Maynard, MD, MHS
Deputy Director
Office of Rare Diseases, Pediatrics, Urologic
and Reproductive Medicine
Center for Drug Evaluation and Research

ENCLOSURES:

- Content of Labeling
 - Prescribing Information
- Carton and Container Labeling

This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.

/s/

JANET W MAYNARD
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